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Relationship between Religious obligations and Satisfaction with life among the elderly of Ahvaz City

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ABSTRACT

In this present research the relationship between attachment to religious obligations and life satisfaction among the elderly was studied in Ahwaz. This study was cross-sectional conducted on 201 elderly people in Ahwaz selected by cluster sampling. The data collection consists of the practice of religious beliefs questionnaire (temple) and life satisfaction (SWLS). Data were analyzed using SPSS software and independent sample T-test, Pearson correlation and linear regression analysis. Four main areas of the temple scale, practice to obligations, desirable practice, membership in religious groups and religious involvement in decision making and choice, had a significant relationship with life satisfaction. The difference between scores of life satisfaction and attachment to the religious obligations of old men and women were significant. Life satisfaction is more in elderly who are interested in religious practice, and this is consistent with the teachings of Islam.

Keywords: Attachment to religious obligations, Religious beliefs, Elderly, Life satisfaction.

INTRODUCTION

During the biological process, humans face a phase called aging which is a phase of normal development. So that it become so interwoven with human destiny and turns into an unavoidable necessity. This phenomenon has been there in all historical periods, but today unlike the past, scientific medical breakthroughs, nutritional status and use of therapeutic practices has increased the number of elderly people in different societies and according to the European sociologist, Sovey, aging is a Phenomena of our time which has the least space for opposition, advances definitely and may conceal many consequences (1).

Historical evidences indicate that religion have a long history. As shown by archaeologist and anthropological studies, religion has been an integral part of human life in all eras (2). Will Durant believes that: "religion is so rich, extensive and complex that no era in human history is devoid of religious beliefs" (3). It has been proven that even a non-believer in religion thinks unconsciously about God and supernatural forces and appeals to them in spiritual crises and distress. According to Frankl, founder of logo-therapy school, a deep and real religious feeling exists deep in unconscious mind of every human (3).

For a long time, religion was a big taboo in psychology; but some evidences about elderly people with high levels of religious commitment called the need for seeking the origin, structure, practices and various and intensive outcomes of cognitive, emotional and behavioral processes of people in later stages of life. Also, some carefully controlled studies on fitness and health demonstrated the helpful effects of believing in religion in elderly people (4). In recent years, gerontologists has specifically focused on the effect of dealing with religion on general health and mental health. This is probably due to the knowledge that proves religion, either as a social institution or as a source of meaning, can be helpful specifically for the elderly. Religion has a fundamental role in providing services, friendships and mental tools for comparing

and matching daily life issues like changes and loss and death. Review of Empirical studies on the effect of religious indices on health and mental health in the elderly is supportive of the above issues (5). As people get older, formal or structured dealing with religion will be a stronger predictor of more health, happiness and satisfaction with life (6).

In the research level, rather contradictory results have been obtained. Although most research studies stated the useful role of beliefs on humans' behavior, in some cases negative impacts of religion on peoples' life have also been referred to. But in general, the result of various studies indicates the positive impact of religion on different aspects of human lives. It has been said that there is a significant relationship between developing religious beliefs and duties which change over time (4). Results of Kaliani research show the positive impact of religion on individual and social levels and adaptive processes in later ages. In his research, Kaliani found that religion was part of socialization process in childhood which continued in the adulthood and contributed to the integrity of person in this stage (7).

In this regard, Peacock and Poloma write: "Polner reports a positive relationship between religion and satisfaction with life; also, Ferraro and Johnson report that religion has a positive impact on mental health and psychological health in adulthood. Religion can have a positive impact on satisfaction with life. Such supports arouse a feeling of physical, cognitive and emotional security (8).

In recent years several studies has been performed on this issue in Iran. Heravi Karimooi in her research on the elderly reports that most elderly people stated performing religious activities and obligations as a means of gaining inner peace (9). Seyf in his study performed in a nursing home showed that the rate of depression in the elderly involved in worship was half of that in others (10). Results of another study for investigating attitude and religious performance of the elderly residing in the nursing home showed that beliefs, attitudes and religious performance are a crucial factor in adapting with aging consequences and providing mental health of the elderly.

Results of another study show that successful aging is significantly more involved in religion (12). Abdi Zarin and Akbarian in their study aimed at review analysis of relationship between religion and religious beliefs with successful aging showed that there is a relationship between successful aging and religious orientation and also between religious orientation and mental health disorder and depression and mental health (13).

Given the extent and complexity of human world and abundance of information, recognizing social phenomena requires a special theoretical framework to explain the facts form a special perspective. Also, this theoretical framework no only enables researcher but also relives him/ her of confusion. In the present study, through literature review a theoretical framework is suggested to study the relationship between religious obligation and elderly satisfaction with life.

RESEARCH METHOD

Study was performed using a survey research method. In terms of time scale, it is a cross sectional and in terms of depth scale, it is an extensive research. Study population were all the elderly of Ahvaz City which their number was found according to the statistical center of Iran and with respect to the general population and housing census data in 1392.

To estimate the sample volume, a pilot study was performed on 30 respondents to determine the variance of studied trait (satisfaction with life rate). Given the obtained score range of 5 to 35 for satisfaction with life ,in order to convert them to p and q, scores 5 to 20 were converted to score 1 and scores 21 to 35 were converted to score 2 through recoding of scores. Eventually, values of p = 0.73 and q = 0.27 were obtained. Using these values, Cochran formula was used to find the sample volume and because the value of d can be statistically calculated between 0.02 and 0.08, it was also equated to 0.05 in this research. Assuming values of n = 12023, d = 0.05 and t = 1.96, using the relevant formula the sample number was calculated to be 195. Yet, to make sure, the number of 201 people was selected as the sample volume.

In order to obtain the selected sample, multi-stage cluster sampling was used. In the first stage, districts 5, 3, 2 and 8 were selected out of the eight districts of Ahvaz. Then, locality 1 of district 2, locality 2 of district 3, locality 3 of district 5 and locality 4 of district 8 were selected. In the last stage, using the information obtained from informants, all people above 65 years of were found and the relevant questionnaire was completed. Main design of the research is a multivariate correlation in which the rate of satisfaction with life is the criterion variable and four main measures of practicing religious obligations (practicing obligations, practicing desirables, religious involvement in decisions and choices and membership in religious groups) were considered as the predictor variables. Temple scale and satisfaction with life scale were used to measure the main variables.

Questionnaire on practicing religious beliefs (temple scale): temple scale consists of 25 questions which measure practicing (not believing or attitude) of Islamic beliefs. Test materials involve four areas

of practicing obligations, practicing desirables, religious activities and religious involvement in decisions and choices of life. Each question has 5 answer choices with a score of 0 -4 assigned to each. Therefore, the lowest total score is zero and highest total score is a hundred.

To measure the reliability of scale, internal consistency coefficient was calculated using cronbach's alpha coefficient. When implementing the temple scale on a 50 people sample, cronbach's alpha of 0.89, average of 96.86, standard deviation of 14.64 and standard error of the mean of 0.80 were obtained. To determine the validity of the scale, two professors at the Faculty of Human Sciences in Shahid Chamran University were asked to give their opinions about this scale. Satisfaction with life scale: this scale is designed by Diener and has been used in different cultures and various studies; this scale has a correlation with other scales of measuring mental health. The validity of this scale has been measures in a four year period with a good result. This scale measures those traits similar to the traits in pathological tests like mental health trials. Satisfaction with life is more associated with lower rate of depression, no previous experience of drug use and social interactions. This scale may be associated with self-defined ideals or what a person wants for others and what is related to his/her past.

To measure the reliability of the scale, internal consistency coefficient was calculated using Cronbach's alpha coefficient. The value of Cronbach's alpha for the scale of satisfaction with life in a group consisting of 30 aged people who were tested to adjust the study's scale, was equivalent to 0.78. The average score of the satisfaction with life scale for this group was 23.43 with the standard deviation of 5.71 and the value of 1.04 for the standard error of the mean. To measure the validity of the scale, two professors at the faculty of Human Sciences in Shahid Chamran University were asked to give their opinions about this scale. In the second stage, when the scale was implemented on a group of 50 people, Cronbach's alpha of 0.82, average of 18.58, standard deviation of 7.28 and standard error of the mean of 0.42 were obtained.

Descriptive statistics, T-tests, Pearson Test and linear regression were used for data analysis. To measure the difference between satisfaction with life and practicing religious beliefs among men and women subjects, independent t-test was used. In the stepwise regression analysis, satisfaction with life variable and other variables (practicing obligations, practicing desirables, religion involvement in decisions and choices and membership in religious groups) were entered into the equation as the criterion (dependent) and predictor (independent) variables, respectively. Data analysis was performed using SPSS software package. In order to determine validity and reliability of the questionnaire Cronbach's alpha and descriptive statistics were used respectively. Pearson correlation coefficient tests, independent t-tests, one-way variance analysis and multivariate regression were used for testing the hypotheses.

FINDINGS

In the present study, descriptive statistics findings showed that 54.23 of the study population were men and the remaining women. Also, 70.64% of subjects were married and 41.5% were iterate (table 1).

Average score of practicing religious beliefs was 4.18 out of 5 and above 3.01 in each of its area. In the satisfaction with life scale, average score of 3.92 out of 7 was obtained by subjects (table 2).

*There was a reverse and significant but weak relationship between life satisfaction and religion involvement in decisions and choices (p < 0.01) (table 3).

After the variable of practicing desirables in explaining satisfaction with life variable, only the variable of religion involvement in decisions and choices has been entered into the regression equation and based on beta coefficients, the more the practicing of desirables, the more the satisfaction with life will be. According to coefficients of determination, practicing religious desirables explains 5 percent of changes in satisfaction with life but with addition of religion involvement in decisions and choices, prediction power increases to 7 percent (table4).

Men's score in questionnaire of practicing religious beliefs and its four areas was higher than that for women (based on 1 to 5). There was a significant difference between scores in the area of membership in religious groups and total score of temple questionnaire, but this difference was insignificant in other areas. Regarding satisfaction with life, women's score was higher than men and the difference between two groups in terms of this variable was significant. Also, average scores of 2.98 and 4.02 were obtained for women's and men's practicing religious obligations, respectively. These scores indicates that men are more satisfied with life, but the difference between the two groups is significant in t-test. Also, average score of religion involvement in decisions and choices for women and men was respectively 4.01 and 4.39 which is not a statistically significant difference (table 5).

DISCUSSION

Findings of the present study showed that all of the four components of practicing religious beliefs (temple scale) including practicing obligations, practicing desirables, religion involvement in decisions and choices and membership in religious groups, have a significant relationship with life satisfaction. But

since in the statistical approach of multivariate regression, analyses are performed on the basis of part and partial correlation, the correlation between data leads to a situation where the only variables allowed to enter the analysis are those still correlated with dependent variable after removing the effect of previous predictor variables. Therefore, eliminating some of the variables in the correlation results does not imply that they are not correlated with life satisfaction, but it means that they do not have more prediction power that predictor variables.

According to the results of present study, two components of temple scale namely practice of desirables and religion involvement in decisions and choices explain for 65% of the variance in satisfaction in life which is very low compared with the value of 58% obtained by Hadianfar for components of temple scale in explaining satisfaction with life. Findings of the present study are in good agreement with the results of Ruhi Azizi, who demonstrated whorshipers' belief in gaining spiritual peace after saying prayer (14), Hervai Karimooi (9), Seyf (10), Ebrahimi and Nasiri (11), Motamedi et al(12), Abdi zarin and Akbarian (13). Finding of the present study are also in agreement with the information obtained by surveys in different nationalities indicating religiously active people report higher levels of happiness (15) and with results of Ellison, Gaym and Galss studies suggesting a positive relationship of religion on satisfaction with life.

Regarding the difference between the rate of satisfaction with life among men and women, findings of the present study are consistent with the results of Hadianfar (17) and Lucas and Gohm (18). The average value of satisfaction with life in the present study was 3.98 which is lower than other cultures. Diener et al reported that the average score of 4 to 5 was obtained by most American subjects. Also, regarding the existence and lack of a significant difference between practice of religious beliefs in men and women, results of the study showed that there is a significant different between these two statistical groups in this regard. Result of the present study are also consistent with the results of Jalilvand (19) and Hadianfard (25).

Table 1. Demographic Variables Distribution of the Elderly Subjects

variable	number	percent
Sex: Female	92	45/77
Male	109	54/22
Marital Status: Married	142	70/64
Divorced	4	1/99
Partners' death	50	24/8
single	5	2/48
Educational status: Illiterate	23	11/44
Higher secondary	48	23/88
Diploma	50	48/87
Associate and Bachelor	41	20/39
Master and higher	5	2/44

Table 2. Descriptive values of Temple scale and satisfaction With Life scale Components

Variable/ Scale deviation	statistical indices			
	Lowest	highest score	average	Standard deviation
Practice of Obligations	1/92	4/9	4/38	0/74
Practice of Desirables	0/91	5	3/01	0/91
Membership in Religious Groups	1/40	4/89	3/48	0/85
Religion Involvement in Decisions	1/04	5	4/18	0/92
Temple Scale (Total)	1/84	4/59	3/92	0/74
Satisfaction with Life	1	7	3/84	1/13

Table 3 . Output of Pearson Test for the Calculation of Correlation between Independent Variables and Satisfaction with Life

Independent Variable	Correlation Coefficient	Significance level
Membership in Religious Groups	-0/68	0/001
Practice of Obligations	-0/039	0/001
Practice of Desirables	-0/214	0/001
Religion Involvement in Decisions	0/001	0/001

Table 4 . Results of Linear Regression to Calculate the Correlation between Independent Variables and Satisfaction with Life

Step	variable	Source of changes	Sum of squares	Degree of Freedom	Mean Square	F ratio	Coefficient of Determination	Beta Coefficient	T ration
First	Practice of obligations	Regression Residual total	659/7 15389/2 15814/38	1 199 200	659/7 77/33	14/09	0/05	-0/23	-3/91
second	Practice of desirables Religion involvement in decisions	Regression Residual total	952/31 14845/8 15814/3	2 198 200	74/97 79/07	8/91	0/07	-0/28 0/143	-4/28 2/48

Results are significant at < 0.01 level.

Table 5. T-Test for Comparing Men and Women in Different Aspects of Practicing Religious Obligations and Satisfaction with Life

	Statistical Indices			
aspects	Average score of Women	Average Score of Men	T-test	Significance Level
Practice of Obligations	4/21	4/45	1/13	0/33
Practice of Desirables	2/1	3/09	1/21	0/32
Membership in Religious Groups	2/95	3/99	3/88	0/01
Religion Involvement in Decisions	4/01	4/39	0/45	0/89
Total Score of Temple Questionnaire	3/11	4/03	2/90	0/02
Satisfaction with Life	2/98	4/02	2/17	0/03

CONCLUSION

Generally, with respect to the findings of the present and previous studies, it seems that religious beliefs are one of the influential factors in satisfaction with life. According to Robert Hume perspective, religion gives something to people which are not obtainable from any other sources. By building trust in the result of our efforts through personal connection to transcendent powers of world, any religion is helpful for its own believers and general state of society.

Given the multi-dimensional nature of aging and satisfaction with life issues, there is a need for other studies to investigate other economic, social, sociological, psychological, as well as physical health aspects of these issues. Limitation of sample to the elderly people of Ahvaz City and also not collaborating in completion of questionnaire and the disability of some of them to provide the necessary information was among the restrictions of this research which are hoped to be overcome in future researches.

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